Image# 12961207043

SCHEDULE E)	ENDENT EXIL		PAGE 1	OF 6
NAME OF COMMITTE (In Full)			FOR SE OF	FORM 24/48
NAME OF COMMITTE (In Full) CREDO SUPERPAC			FEC IDENTIFICAT	ON NUMBER ▼
			C C00507517	
Check If X 24-hour report 48-hour report	New report Amends repo	ort filed on	= M / D = D /	Y = Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee		Date		
Joshua Brose			M / D D /	YYYY
Mailing Address 302 9th Street			10 25	2012
SOZ SIII GIIGGI		Amoun	nt	
City State	e Zip Code			1250.00
Minneapolis MN	55414	Transac	ction ID : SE.11842	1230.00
Purpose of Expenditure Field Organizer	Category/	Office Sough		State: MN
Tield Organizer	Type		Senate	District: 06
Name of Federal Candidate Supported or Opposed by Ex	penditure:	Observator Occupa	President	
MICHELE BACHMANN		Check One:	Support	Oppose
Calendar Year-To-Date Per Election for Office Sought	28677.69	Disbursemen 2012 Oth	nt For: Primary	General Control
Full Name (Last, First, Middle Initial) of Payee		Date		
Credo Mobile				Y
Mailing Address 101 Market Street			10 24	2012
Suite 700		Amour	nt	
City State	e Zip Code			1814.56
San Francisco CA	94105	Transac	ction ID : SE.11844	
Purpose of Expenditure Phones	Category/	Office Sough		State: MN
Filoties	Type		Senate	District: 06
Name of Federal Candidate Supported or Opposed by Ex	penditure:	0110	President	<b>N</b>
MICHELE BACHMANN		Check One:	Support	Oppose
Calendar Year-To-Date Per Election for Office Sought	26177.69	Disbursemen 2012 Oth	nt For: Primary her (specify)	General
(a) SUBTOTAL of Itemized Independent Expenditures		•		3064.56
(b) SUBTOTAL of Unitemized Independent Expenditures		· •	7 7	
(c) TOTAL Independent Expenditures				
(b) 101A2 maspondon Expondicarco		•		
Under penalty of perjury I certify that the independent exp with, or at the request or suggestion of, any candidate or a party committee) any political party committee or its agent.	authorized committee or agent o			
Becky Bond	[Floatnonically File J]	M = M /		Y
Signature	[Electronically Filed] Date	10	25 20	IZ

(SC	HEDULE E)			PAGE 2 FOR SE OF	OF 6 FORM 24/48
NA	ME OF COMMITTE (In Full)		FEC ID	ENTIFICATION	ON NUMBER ▼
C	REDO SUPERPAC			C00507517	
Ch	eck If 🔀 24-hour report 🔲 48-hour report 🔲 New report 🔲 Amends report	rt filed on	M = M /	D   D /	Y Y Y Y Y
Т	Full Name (Last, First, Middle Initial) of Payee	DI			
	Credo Mobile	Date	10 /	24	2012
	Mailing Address 101 Market Street		.0		
	Suite 700	Am	ount		
	City State Zip Code				1814.56
	San Francisco CA 94105	Tran	saction ID	: SE.11849	
	Purpose of Expenditure Phones  Category/ Type	Office So	ught: X	House Senate	State: MN District: 08
ľ	Name of Federal Candidate Supported or Opposed by Expenditure:			President	
	MICHELE BACHMANN	Check Or	ne:	Support	Oppose
	Calendar Year-To-Date Per Election for Office Sought 43138.59	Disbursen 2012	nent For: [ Other (spe	Primary ecify)	General
	Full Name (Last, First, Middle Initial) of Payee Arif Muneem Hasan	Dat	te 10 /	25	2012
ľ	Mailing Address 302 9th Street SE		10	23	2012
		Am	ount		
	City State Zip Code				1250.00
	Minneapolis MN 55414			) : SE.11841	
	Purpose of Expenditure Field Organizer  Category/ Type	Office So	ught: X	House Senate	State: MN District: 06
	Name of Federal Candidate Supported or Opposed by Expenditure:			President	
	MICHELE BACHMANN	Check Or	ne:	Support	Oppose
	Calendar Year-To-Date Per Election for Office Sought	Disbursen 2012	ment For: [ Other (spe	Primary ecify)	General
	a) SUBTOTAL of Itemized Independent Expenditures	•			3064.56
(b) SUBTOTAL of Unitemized Independent Expenditures					
(	c) TOTAL Independent Expenditures	•		7	
١	Inder penalty of perjury I certify that the independent expenditures reported herein were vith, or at the request or suggestion of, any candidate or authorized committee or agent or arty committee) any political party committee or its agent.				
	Becky Bond [Electronically Filed] Date	M = M 10	/ 25	/ Y Y 201	2
	Signature			201	

SCHEDULE E)	PAGE 3 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
CREDO SUPERPAC	C C00507517
Check If X 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
Heather Hinkel	M M / D D / Y Y Y Y
Mailing Address 219 N 7 1/2 Ave W	10 24 2012 mount
	iniount
City State Zip Code Duluth MN 55806	853.36 ansaction ID : SE.11845
Purpose of Expenditure Field Organizer  Category/ Type  Category/ Type	Sought: House State: MN
	President District: 08
Name of Federal Candidate Supported or Opposed by Expenditure:  RAYMOND J MR. CRAVAACK  Check	
Calendar Year-To-Date Per Election for Office Sought 37223.98 Disburs 2012	ement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee Hlinko Communications	oate
Mailing Address 247 West 87th Street	10 24 2012
	mount
City State Zip Code	
New York NY 10024	2500.00
Purpose of Expenditure  Category/  Office S	ansaction ID : SE.11843 Sought: House State: MN
Web Advertising Type	Senate District: 06 President
Name of Federal Candidate Supported or Opposed by Expenditure:  MICHELE BACHMANN  Check	
Calendar Year-To-Date Per Election for Office Sought Disburs 24363.13	ement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	3353.36
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(b) TOTAL maspondoni Experiancio	
Under penalty of perjury I certify that the independent expenditures reported herein were not made	e in cooperation, consultation, or concert
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, c party committee) any political party committee or its agent.	

SCHEDULE E)	PAGE 4 OF 6 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
CREDO SUPERPAC	C C00507517	
Check If X 24-hour report 48-hour report New report Amends report	rt filed on	
Full Name (Last, First, Middle Initial) of Payee Hlinko Communications	Date	
Mailing Address 247 West 87th Street	10 24 Y 2012	
#9A	Amount	
City State Zip Code New York NY 10024	2500.00	
Purpose of Expenditure Web Advertising  Category/ Type	Office Sought: House State: MN Senate District: On	
	President District: 08	
Name of Federal Candidate Supported or Opposed by Expenditure:  RAYMOND J MR. CRAVAACK	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General  2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee  Jill Otto	Date  10 24 2012	
Mailing Address 3513 Bryant Ave. S.	10 24 2012	
	Amount	
City State Zip Code Minneapolis MN 55408	106.67 Transaction ID : SE.11838	
Purpose of Expenditure Field Organizer Category/ Type	Office Sought: House State: MN Senate District: 06	
Name of Federal Candidate Supported or Opposed by Expenditure:  MICHELE BACHMANN	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General  Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	2606.67	
(b) SUBTOTAL of Unitemized Independent Expenditures	·	
(c) TOTAL Independent Expenditures	·	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Becky Bond [Electronically Filed] Date Signature	10 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
orginaturo		

SCHEDULE E)	PAGE 5 OF 6 FOR SE OF FORM 24/48		
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼		
CREDO SUPERPAC	C C00507517		
Check If X 24-hour report 48-hour report New report Amends report	rt filed on		
Full Name (Last, First, Middle Initial) of Payee  Lillian Ovellete-Havitz	Date		
Mailing Address 88 Clarence Ave.	10 24 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Amount		
City State Zip Code Minneapolis MN 55414	106.67 Transaction ID : SE.11840		
Purpose of Expenditure Field Organizer Category/ Type	Office Sought: House State: MN Senate District: 06		
Name of Federal Candidate Supported or Opposed by Expenditure:	President		
MICHELE BACHMANN	Check One: Support Oppose		
Calendar Year-To-Date Per Election for Office Sought 21863.13	Disbursement For: Primary General  2012 Other (specify)		
Full Name (Last, First, Middle Initial) of Payee	Date		
Ann Elise Rupert	10 24 Y 2012		
Mailing Address 4777 McComber Rd.	Amount		
City State Zip Code	70		
Duluth MN 55803	746.69 Transaction ID : SE.11847		
Purpose of Expenditure Field Organizer Category/ Type	Office Sought: House State: MN Senate District: 08		
Name of Federal Candidate Supported or Opposed by Expenditure:	President		
RAYMOND J MR. CRAVAACK	Check One: Support Oppose		
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General  2012 Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures	853.36		
033.30			
(b) SUBTOTAL of Unitemized Independent Expenditures	·		
(c) TOTAL Independent Expenditures	<b>•</b>		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Becky Bond [Electronically Filed] Date	10 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature			

(SCHEDULE E)	PAGE 6 OF 6 FOR SE OF FORM 24/48		
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼		
CREDO SUPERPAC	C C00507517		
Check If X 24-hour report 48-hour report New report Amends report	filed on M M / D D / Y Y Y Y Y Y		
Full Name (Last, First, Middle Initial) of Payee			
Matthew Levi Scott	Date		
Mailing Address 7309 W. Skyline Pkwy	10		
City State Zip Code			
Duluth MN 55810	853.36 Transaction ID : SE.11846		
Purpose of Expenditure Field Organizer  Category/ Type	Office Sought: House State: MN Senate District: 08		
Name of Federal Candidate Supported or Opposed by Expenditure:	President		
RAYMOND J MR. CRAVAACK	Check One: Support Oppose		
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) of Payee Patricia Steck	Date 10 24 2012		
Mailing Address 869 City Rd D	10 24 2012		
#308	Amount		
City State Zip Code	100.07		
Vadnais Heights MN 55109	106.67 Transaction ID : SE.11839		
Purpose of Expenditure Field Organizer Category/ Type	Office Sought: House State: MN Senate District: 06		
Name of Federal Candidate Supported or Opposed by Expenditure:	President		
MICHELE BACHMANN	Check One: Support Oppose		
Calendar Year-To-Date Per Election for Office Sought 21756.46	Disbursement For: Primary General Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures	960.03		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures	13902.54		
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.			
Becky Bond [Electronically Filed]	10 25 2012		
Signature Date	10 25 2012		